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SECTION 7 510(K) SUMMARY OF SAFETY EFFECTIVENESS

This 510(k) summary of safety and effectiveness information is being submitted in accordance with the requirements of the Safe Medical Device Act (SMDA) of 1990. The contents of this 510(k) summary have been provided in conformance with 21 CFR \$807.92.

Date:

February 3, 2006

Common/Usual Name:

Subsystem, proportioning

Trade/Proprietary Name:

NxStage Dialysate Preparation Module

Classification Name:

Hemodialysis Systems & Accessories

21CFR 876.5820

Device Classification:

Class II

Product Code:

78 FKR

Device Panel:

Gastroenterology-Urology (GU)/Gastro-Renal

(GRDB)

510(k) Sponsor &

NxStage Medical, Inc

Owner/Operator:

439 South Union St, Suite 501

Lawrence, MA 01843

Owner/Operator No. 9045797

Establishment Registration #3003464075

Contact Person:

Norma LeMay

Manager, Regulatory Affairs

Device Description:

The NxStage Dialysate Preparation Module is an optional accessory to the NxStage System One that pre-treats and purifies water that mixes with concentrate to produce dialysate meeting the requirements of the ANSI/AAMI Standards, RD52:2004 and RD62:2001. The dialysate is to be used with the NxStage System One during hemodialysis treatments.

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Substantial Equivalence:

This submission is a Special 510(k) Device Modification as described in FDA's guidance document entitled "The New 510(k) Paradigm - Alternate Approaches to Demonstrating Substantial Equivalence in Premarket Notifications." In support of this 510(k), NxStage has provided certification of compliance to 21 CFR 820.30 Design Control requirements. Design validation testing has been performed to ensure that the modified device meets design specifications. The modified NxStage Dialysate Preparation Module has been compared to the baseline as cleared in K043436 and found to be substantially equivalent.

Conclusion:

Based on the device indications for use, comparison of descriptive and technological characteristics, and design control certification, the modified NxStage Dialysate Preparation Module has been shown to meet the minimum requirements that are considered acceptable for its intended use and is substantially equivalent to the baseline device.





Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

MAR 3 1 2006

Ms. Norma J. LeMay Manager, Regulatory Affairs NxStage Medical, Inc. 439 South Union Street 5th Floor LAWRENCE MA 01843

Re: K060296

Trade/Device Name: NxStage Dialysate Preparation Module

Regulation Number: 21 CFR §876.5820

Regulation Name: Hemodialysis system and accessories

Product Code: FKR and KPO

Regulation Number: 21 CFR §876.5665

Regulation Name: Water purification system for hemodialysis

Product Code: FIP Regulatory Class: II Dated: March 9, 2006 Received: March 10, 2006

Dear Ms. LeMay:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at one of the following numbers, based on the regulation number at the top of this letter:

| 21 CFR 876.xxxx | (Gastroenterology/Renal/Urology) | 240-276-0115 |
|-----------------|----------------------------------|--------------|
| 21 CFR 884.xxxx | (Obstetrics/Gynecology) | 240-276-0115 |
| 21 CFR 892.xxxx | (Radiology) | 240-276-0120 |
| Other | (| 240-276-0100 |

Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/industry/support/index.html.

Sincerely yours,

Manay C. Brogdon
Nancy C. Brogdon

Director, Division of Reproductive, Abdominal, and Radiological Devices

Office of Device Evaluation.

Center for Devices and Radiological Health

Enclosure

INDICATIONS FOR USE

| 510(k) Number (if known): Device Name: | KC602965 NxStage Dialysate Preparation Module | |
|---|--|--|
| Indications for Use: | The NxStage Dialysate Preparation Module is an optional accessory to the NxStage System One that prepares dialysate for use during hemodialysis, as prescribed by the physician. | |
| | | |
| Prescription Use X (Part 21 CFR 801 Subpart D | | Over-The-Counter Use (21 CFR 807 Subpart C) |

Concurrence of CDRH, Office of Device Evaluation (ODE)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

(Division Sign-Off)

Division of Reproductive, Abdominal,

and Radiological Devices

5.000 Number 1060296 510(k) Number ____